

Lamont Hunter
PCT International Division
(703) 305-0980

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO.	FILING DATE						
						10/009792							
						APPLICANT(S)							
CLAIMS													
1	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		* IND.	* DEP.	* IND.	* DEP.	* IND.	* DEP.	
	IND.	DEP.	IND.	DEP.	IND.	DEP.							
2							51						
3	1						52						
4		1					53						
5			1				54						
6				1			55						
7		1					56						
8			1				57						
9		1					58						
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43							92						
44							93						
45							94						
46							95						
47							96						
48							97						
49							98						
50							99						
TOTAL IND.			2				100						
TOTAL DEP.			B										
TOTAL CLAIMS			10										